## LATHROP & GAGELLP

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TERRY J. BRADY
DIRECT LINE: 816.460.5635
EMAIL: TBRADY@LATHROPGAGE.COM
WWW.LATHROPGAGE.COM

2345 GRAND BOULEVARD, SUITE 2200 KANSAS CITY, MISSOURI 64108-2618 PHONE: 816.292.2000

FAX: 816.292.2001

October 1, 2015

### **VIA HAND-DELIVERY**

Federal Election Commission 999 E. Street, N.W. Washington, D.C. 20463

RE: Graves for Congress

Amended Statement of Organization

C00359034

Dear Sir/Madam:

Enclosed please find an original and copies of FEC Form 1, Amended Statement of Organization for candidate committee Graves for Congress. We would appreciate your filing the 'same for and on our behalf.

Please return to us a filed-stamped copy for our file.

Please do not hesitate to call if you have any questions.

Very truly yours,

LATHROP & GAGE LLP

By:

Terry J. Brad

Encls.

# 20-5:10:00:0M:00025024

FEC FORM 1

Only

# STATEMENT OF ORGANIZATION

PEC MAIL CENTER

2015 OCT -5 PM 4: 00

Office Use Only

NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Graves   for   Congress	1 1 1 1 1 1 1 1 1 1			
<u> </u>		<u> </u>		
ADDRESS (number and street)	2345 Grand Blvd.,	Suite 2400		
(Check if address is changed)				
	Kansas City CITY ▲		MO 6 STATE ▲	41082612 ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRES	SS			
◆ (Check if address is changed)			<del> </del>	
	Optional Second E-Mail Addr	ess		
		<u>-                                    </u>		
COMMITTEE'S WEB PAGE ADD  (Check if address is changed)	ORESS (URL)			
2. DATE 1 0 0	1 2015			
3. FEC IDENTIFICATION NU	UMBER ► C CO	0359034		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined th	is Statement and to the best of	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	Jean Paul Brads	shaw		
Signature of Treasurer	ell Paul Bu	ا ا	Date 1 0	0 1 2 0 1 5
NOTE: Submission of false, errone	eous, or incomplete information m			penalties of 52 U.S.C. §30109.
Office Use		For further Information c Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

Toll Free 800-424-9530 Local 202-694-1100

	, 101	III 1 (Nevised 02/2009	, <u> </u>					raye z	
		OMMITTEE							
Candid	late	Committee:							
(a)	X	This committee is a	orincipal campai	gn com	nmittee. (Comp	lete the candidate in	nformation below	<i>!</i> .)	
(b)		This committee is an information below.)	authorized com	mittee,	and is NOT a	principal campaign	committee. (Co	mplete the candid	date
Name of Candidat		Sam Graves	<b>3</b>	<u>,</u>	<u> </u>	<u>                                     </u>	<u> </u>		
Candidat	te	222	Office	₩.				State	МО
Party Aff	filiatio	on <b>REP</b>	Sought:	X	House	Senate	President	District	06
(c)		This committee supp	orts/opposes onl	y one	candidate, and	d is NOT an authoriz	ed committee.		
Name of Candidat						1   1   1   1   1   1   1   1   1   1			1 1
Party C	Com	mittee:							
(d)		This committee is a			ational, State subordinate) c	ommittee of the		(Democratic, Republican, etc	:.) Party
Politica	al A	ction Committee (	PAC):		**************************************				
(e)		This committee is a	separate segrega	ated fu	ınd. (Identify co	nnected organization	on line 6.) Its co	onnected organiza	ation is
		Corporation			Corpor	ation w/o Capital Sto	ock :	Labor Organi	zation
		Membership	Organization		Trade	Association		Cooperative	
		In add	dition, this commi	ttee is	a Lobbyist/Reg	gistrant PAC.			
(f)	. <del>.</del>	This committee support committee. (i.e., nonc			n one Federal	candidate, and is N	OT a separate	segregated fund	or party
		In addition, th	is committee is a	Lobby	vist/Registrant F	PAC.			
		In addition, th	is committee is a	Leade	ership PAC. (Id	entify sponsor on line	6.)		
Joint F	und	raising Represen	tative:						The state of the s
(g)		This committee collect							ical
(h)		This committee collec						two or more politi	cal
C	Com	mittees Participating	in Joint Fund	raiser					
1				11			ımber C	Les Control	.:
			1 1 ! ! !	<del></del>	1	FEC ID nu	umbar C		*
2	2.					T T T T C ID III	iniber C		
3	3.			Ш		FEC ID nu	imber C		
4	4.			11		FEC ID nu	mber C		

1 20 1 01111 1 (110	evised 02/2000/		
Write or Type Committee	e Name		
6. Name of Any Conne	ected Organization, Affiliated Committee, Joint I	Fundraising Representative, o	or Leadership PAC Sponsor
Shotz_Me Pallitic	al Action Committee		
PHOM-INC INCIDENT	######################################	1 1 1 1 1 1 1 1 1	<u> </u>
	ון ו ביים אימי		
Mailing Address	2345   Grand   Blvd.	<del>                                     </del>	
	Kansas  City		64108  - 2612
	CITY	STATE	ZIP CODE
Relationship: - Co	onnected Organization X Affiliated Committee	Joint Fundraising Representati	
	·		
<ol> <li>Custodian of Record books and records.</li> </ol>	ds: Identify by name, address (phone number o	ptional) and position of the per	son in possession of committee
Full Name			
Mailing Address			
•			
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	<u></u>
	ame and address (phone number optional) of the total (e.g., assistant treasurer).	ne treasurer of the committee; a	and the name and address of
Full Name of Treasurer			
Mailing Address			
		111111	
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	
1			

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FEC Form 1 (Revised	02/2009)	Page <b>3</b>
Write or Type Committee Nam	ne .	
5. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
Sam Graves Victory	Fund	
· 		
Mailing Address	2345  Grand Blvd.	
, maining , manifold	Suite 2400	
	Kansas City	64108 - 2612
	CITY . STATE	ZIP CODE
Relationship: Connecte	ed Organization X Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person	in possession of committee
Full Name Terry	J. Brady	
Mailing Address	2345 Grand Blvd.	
	Suite 2400	
	Kansas City MO	64108 - 2612
		04106 - 2012
Title or Position	CITY STATE	ZIP CODE
Title or Position  Deputy Treasurer		
Deputy Treasurer	Telephone number [816]  nd address (phone number optional) of the treasurer of the committee; and t	ZIP CODE -   <b>460</b>   -   <b>5635</b> ;
Deputy Treasurer  Treasurer: List the name are any designated agent (e.g.,	Telephone number [816]  nd address (phone number optional) of the treasurer of the committee; and t	ZIP CODE -   460   -  5635 ;
Deputy Treasurer  3. Treasurer: List the name ar any designated agent (e.g.,	Telephone number 816   square of the committee; and t assistant treasurer).	ZIP CODE  - 460 - 5635  he name and address of
Deputy Treasurer  3. Treasurer: List the name ar any designated agent (e.g.,  Full Name of Treasurer  Jean J	Telephone number 816  nd address (phone number optional) of the treasurer of the committee; and t assistant treasurer).  Paul Bradshaw	ZIP CODE  - 460   - 5635   he name and address of
Deputy Treasurer  3. Treasurer: List the name ar any designated agent (e.g.,  Full Name of Treasurer  Jean J	Telephone number 816  Ind address (phone number optional) of the treasurer of the committee; and t assistant treasurer).  Paul Bradshaw  2345 Grand Blvd.	ZIP CODE  - 460   - 5635   he name and address of
Deputy Treasurer  Treasurer: List the name ar any designated agent (e.g.,  Full Name of Treasurer  Jean J	Telephone number 816  nd address (phone number optional) of the treasurer of the committee; and t assistant treasurer).  Paul Bradshaw  2345 Grand Blvd.  Suite 2400	ZIP CODE  - 460   - 5635    the name and address of

X

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<u> </u>		·			
Full Name of Designated Agent					
Mailing Address		<u> </u>			
		1 1 1 1 1			
T	ĊITY	STATE	ZIP CODE		
Title or Position	Telephone	e number	1-1		
safety deposit boxes or n Name of Bank, Depositor		mmittee deposits fu	unds, holds accounts, rents		
Mailing Address	P.O. Box 410889				
	Kansas City	MO	64141 -		
	CITY	STATE	ZIP CODE		
Name of Bank, Depository, etc.					
, ,	Bank, N.A.	1111			
Mailing Address	1010 Grand				
	Kansas City	МО	64106 -		
	CITY	STATE	ZIP CODE		

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